PTO/58/06 (08-03)
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Substitute for Form PTO-875									Application or Dockel Number		
	CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		on	OTHER TIMN SMALL ENTITY	
_	FOR	NUMBER FILED		MUM C	BEREXTRA	RATE	FEE]	RATE	FEE	
	BASIC FEE (37 CFR 1.16(a))							1	1000		
	TOTAL CLAIMS 37 CFR 1.18(c)) minus 20 s						\$	OR		\$	
11/	DEPENDENT CL	minut 20 C		20 1		X 1		Ott	X \$		
(3	(37 CFR 1.10(b))			minus	3 '		X \$		OR	x \$	<u> </u>
M	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ 3	i	OR	1 8	
1.	' If the difference in column 1 is less than zero, enter '0' in column 2.						TOTAL		OR	TOTAL	
	(CLAIM	IS AS AM	IENDEI	D – PART II						
_	(Column 1) (Column 2) (Column 3)					SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		RE	MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	HAIE	ADDI- TIONAL ——FEE		RATE	ADDI- TIONAL FEE
∑ C	Total (3) CER VIG(CII	```	\leq	Minus	135		×125.		_0R	x:50.	
N N N	Independent (31 CFR 1 140)	1	0	Minus	(0	·	x:/00.		OR	. 200	
₽	FIRST PRESEN	HOITAIN	OF KULTIPL	E DEPEN	SENI CLAM (37C	FR 1 16/41)			_		
┢	.l				(6.0		101AL		OR	101AL	
							ADD'L FEE		OR	ADD'L FEE	
			lumn 1)		(Column 2)	(Column 3)					
ENDMENT B	<u> </u>	REA	LAIMS MAINING FTER NDMERT	_	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA; FEE
	()) CER FIG()	'	į	Minus	"	-	x \$ =		OR	A \$=	
A N N	()) () R + (6/6))			Minus		-	x \$=	:	OR	x. \$ =	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (1) CFR 1 16(01)						+ 5 =		Ot-	+ 5 =	
							TOTAL ADD'L FEE		OR I	TOTAL	
		(Celi	vmn 1)		(Column 2)	(Column 3)				•	
AMENDMENT C		REM Af	AIMS AINING TER OMERT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI LIONAL FEE
	Local Control			titinus	••	-	x \$=		OR). \$ =	
	(3) (16) (Coll Independent	•		Minus			x \$=		OR	x \$ =	 -
AR	FIRST PRESENT	FAULTIPLE	DELENDE	NT CLAIM (37 CF)	+5 :		Ott.	+ 5 :			
TOTAL ADDITECT OF										TOTAL ADD L FEF	

If the Bighest Number Previously Paid For IN THIS SPACE is less than 20, enter '20'

If the Bighest Number Previously Paid For IN THIS SPACE is less than 3, enter '3'

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This collection of information is reduced by 37 CFS 1.16. The information is required to obtain or retain a benefit to the nutric which is to file (and by the USFTO to process) an application. Confidentiality is governed by 35 U.S.C. 127 and 37 CFR 1.14. This collection is estimated to take 17 minutes to complete, including gathering, prepanding and submitting the completed application from to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademan Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TOL. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.